

Please provide the following information about your performance. Required fields are marked with an asterisk (*).

Name of the performance group * <i>(this will be printed on the program)</i>													
Primary point of contact * <i>(group manager)</i>	Name: Phone: Cell phone: E-mail:												
Title of performance *													
Onstage requirements *	<table border="0"> <tr> <td>Number of performers:</td> <td>Performance length:</td> </tr> <tr> <td>Set-up time needed:</td> <td>Tear-down time needed:</td> </tr> <tr> <td>Number of chairs:</td> <td>Number of music stands:</td> </tr> <tr> <td>Choral risers (Y/N):</td> <td></td> </tr> <tr> <td>Performance type (band, choir, dance etc):</td> <td></td> </tr> <tr> <td>Other requirements:</td> <td></td> </tr> </table>	Number of performers:	Performance length:	Set-up time needed:	Tear-down time needed:	Number of chairs:	Number of music stands:	Choral risers (Y/N):		Performance type (band, choir, dance etc):		Other requirements:	
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Number of chairs:	Number of music stands:												
Choral risers (Y/N):													
Performance type (band, choir, dance etc):													
Other requirements:													
Will you use the dressing room? *	<input type="checkbox"/> Yes <input type="checkbox"/> No												
Names of performers * <i>(this will be printed on the program)</i>													

Permission to Use Photographs & Video

I grant the International Ukrainian Festival, its representatives and employees the right to take photographs and videos of my group and our performance. I authorize the International Ukrainian Festival, its assignees and transferees to copyright, use and publish the same in print and/or electronically.

I agree that the International Ukrainian Festival may use such photographs and videos of my group with or without my group's name and for any lawful purpose, including publicity, illustration, advertising, and gallery exhibit, web content and festival promotion.

To the extent allowed by law, in consideration of participants being allowed to use City of Bellevue facilities and/or participate in City-sponsored activities, Sponsor/Vendor assumes all risks, including risk of injury or death, associated with Sponsor/Vendor's use of said facilities and/or participation in said activities. Sponsor/Vendor further agrees on behalf of his/herself, his/her heirs, executors, assigns, and personal representatives to waive and release any and all rights and claims for damages, including attorney fees, I now, or may hereafter have, whether known or unknown, against the Consulate of Ukraine in Seattle and the City of Bellevue and its officials, employees, and agents for any injuries suffered by Sponsor/Vendor in connection with the use of City facilities or participation in City-sponsored activities. By signing this form, Sponsor/Vendor acknowledges that s/he has carefully read this Waiver of Liability and fully understands that s/he is waiving any right to bring a legal action to assert a claim against the Consulate of Ukraine in Seattle and the City of Bellevue for negligence.

I have read and understood the above:

Group Manager Signature _____

Printed Name _____

Group Name _____

Date _____